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2013 FEB 20 AM 11:28 2013 FEB 14 A 11:06

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
McCarty, Kevin M

1. Office, Agency, or Court

Agency Name

CITY OF SACRAMENTO

Division, Board, Department, District, if applicable

Your Position

Mayor and Council Office

City Council

► If filing for multiple positions, list below or on an attachment.

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Sacramento

☒ Other Multi jurisdictions

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012

-or-

The period covered is / / , through December 31, 2012.

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ Candidate: Election Year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5

herein and in any attached schedules is true and complete. I know

I certify under penalty of perjury under the laws of the State of California

Date Signed 02/06/2013  
(month, day, year)

Agency	Division, Board, Department, District	Position
CITY OF SACRAMENTO	Sacramento Regional Arts Facilities Financing Authority	Member
Regional Human Rights/Fair Housing Commission	Mayor and Council Office	Member
Sac Metropolitan Cable Commission	Mayor and Council Office	Member
Sac Public Library Authority	Mayor and Council Office	Member
Sac Regional County Solid Waste Authority	Mayor and Council Office	Member
Sac Transportation Authority	Mayor and Council Office	Member
Sac Regional County Sanitation District	Mayor and Council Office	Member

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

McCarty, Kevin M

## ▶ NAME OF BUSINESS ENTITY

ICMA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Retirement Corporation

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☒ Other Mutual Funds  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

McCarthy, Kevin M

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

3809 T Street

CITY

Sacramento CA 95816

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_

ACQUIRED

\_\_\_\_/\_\_\_\_/\_\_\_\_

DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

Jessica Pereyda

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

1911 14th Street 1913 14th Street

CITY

Sacramento CA 95814

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_

ACQUIRED

\_\_\_\_/\_\_\_\_/\_\_\_\_

DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

Barbara Mason

Jeff Rodgers

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

Bank of America

ADDRESS (Business Address Acceptable)

100 N tyron St, #220

Charlotte NC 28202

BUSINESS ACTIVITY, IF ANY, OF LENDER

Mortgage Lender

INTEREST RATE

4.50%

☐ None

TERM (Months/Years)

360 Months

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

Chase

ADDRESS (Business Address Acceptable)

270 Park Avenue

New York NY 10017

BUSINESS ACTIVITY, IF ANY, OF LENDER

Mortgage Lender

INTEREST RATE

5.25%

☐ None

TERM (Months/Years)

240 Months

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

☐ Guarantor, if applicable

Comments:

(Other than Gifts and Travel Payments)

FAIR POLITICAL PRACTICES COMMISSION

McCarty, Kevin M

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Leticia Garcia

ADDRESS (Business Address Acceptable)  
State Capitol, Rm 3048  
Sacramento CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

## YOUR BUSINESS POSITION

Legislative Assistant

GROSS INCOME RECEIVED

☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☒ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_ (Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

TERM (Months/Years)

\_\_\_\_\_ % ☐ None

☐ None ☐ Personal residence

☐ Real Property \_\_\_\_\_ Street address

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_ (Describe)

**Comments:**

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name _____ <u>McCarty, Kevin M</u>
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► NAME OF SOURCE (Not an Acronym)

Kaiser Foundation Health Plan, Inc  
 ADDRESS (Business Address Acceptable)  
6600 Bruceville Road  
Sacramento CA 95823  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 27 / 12</u>	\$ <u>175.00</u>	<u>Sac Metro Chamber Annual Dinner</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

Comments: \_\_\_\_\_